2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

G02770 **DOCUMENT #**

1. Entity Name

H & T INCORPORATION OF TALLAHASSEE



Jan 23, 2003 8:00 am Secretary of State 01-23-2003 90226 030 ***150.00

THE THOOM OF TALLAHAOOLL					7					
Principal Place of Business 2608 MARSTON RD PO BOX 13485 TALLAHASSEE FL 32308		Mailing Address ,2608 MARSTON RD PO BOX 13485 TALLAHASSEE FL 32308								
2. Principal Place of Business		3: Mailing Address			-	T TOURHAL TOUR TOURS HAVE A CONTRACT IN THE		il eleli bi	III	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\dashv	CHECK HERE IF MAKING CHANGES				
City & State		City & State			4.	4. FEI Number 59-2225670 Applied For Not Applicable				
Zip	Country	Zip Count		, 5. _Cer		_Certificate of Status Desired	□ \$8.7	75 Addi Required	tional	
	6. Name and Address of Current F				7.	7. Name and Address of New Registered Agent				
				Name						
TALLEY, H 2608 MAF	Herbert W., Sr. Iston RD	Str		Street Address	t Address (P.O. Box Number is Not Acceptable)					
TALLAHAS	SSEE FL 32308									
,		Charless -		City	FL Zip Code					
	named entity/submits this statement for ons of registered agent. Aggusture, tiped or printed name of registered agent ar	Myk. Hoe	BE	ed office or regist	Ti	gent, or both, in the State of Florid THEY AV 22 reinstating)	a. I am familia	er with, a	and accept	
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State		·	·	Election Campaign Finan- Trust Fund Contribution.		Added	May Be to Fees	
10.			11.		Al	DDITIONS/CHANGES TO OFFICE				
TITLE NAME STREET ADDRESS (CITY-ST-ZIP	D Talley, annie e. 2608 Marston RD Tallahassee Fl							Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STDV TALLEY, HERBERT W., SR. 2608 MARSTON RD TALLAHASSEE FL	MARSTON RD STR			رزات میسد.	y company and continue of the		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARVEY, MARY J. 1405 CENTERVILLE RD STE. 5200 TALLAHASSEE FL	J. LLE RD STE. 5200 TITL NAM STRI					<u> </u>	change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOO GETTIER TO GIE, GEOG				·		Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	F					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		1			c	hange	Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: